

Fill in this information to identify your case:

of 3

Debtor 1	Earle Stanley Greer		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of Pennsylvania			
Case number (If known)	18-18146elf		

 Check if this is an amended filing**Official Form 122B****Chapter 11 Statement of Your Current Monthly Income**

12/15

You must file this form if you are an individual and are filing for bankruptcy under Chapter 11. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

- Not married.** Fill out Column A, lines 2-11.
- Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.
- Married and your spouse is NOT filing with you.** Fill out Column A, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	<i>Column A</i> Debtor 1	<i>Column B</i> Debtor 2		
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ <u>0.00</u>	\$ _____		
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ <u>0.00</u>	\$ _____		
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ <u>0.00</u>	\$ _____		
5. Net income from operating a business, profession, or farm	<table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td style="text-align: center;">Debtor 1</td> <td style="text-align: center;">Debtor 2</td> </tr> </table>	Debtor 1	Debtor 2	
Debtor 1	Debtor 2			
Gross receipts (before all deductions)	\$ <u>0.00</u>	\$ _____		
Ordinary and necessary operating expenses	- \$ <u>0.00</u>	- \$ _____		
Net monthly income from a business, profession, or farm	\$ <u>0.00</u>	\$ <u>0.00</u> Copy here ➔ \$ <u>0.00</u> \$ _____		
6. Net income from rental and other real property	<table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td style="text-align: center;">Debtor 1</td> <td style="text-align: center;">Debtor 2</td> </tr> </table>	Debtor 1	Debtor 2	
Debtor 1	Debtor 2			
Gross receipts (before all deductions)	\$ <u>See</u>	\$ _____		
Ordinary and necessary operating expenses	- \$ <u>See</u>	- \$ _____		
Net monthly income from rental or other real property	\$ <u>9,892.00</u>	\$ <u>9,892.00</u> Copy here ➔ \$ <u>9,892.00</u> \$ _____		

Debtor 1 **Earle Stanley Greer**
 First Name Middle Name Last Name

Case number (if known) **18-18146elf**

Column A Debtor 1	Column B Debtor 2
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7. **Interest, dividends, and royalties** \$ 0.00 \$ _____

8. **Unemployment compensation** \$ 0.00 \$ _____

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: ↓

For you..... \$ 0.00

For your spouse..... \$ _____

9. **Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act. \$ 0.00 \$ _____

10. **Income from all other sources not listed above.** Specify the source and amount.

Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism.

If necessary, list other sources on a separate page and put the total below.

_____ \$ _____ \$ _____
 _____ \$ _____ \$ _____

Total amounts from separate pages, if any.

+ \$ 0.00 + \$ _____

11. **Calculate your total current monthly income.**

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

\$ <u>9,892.00</u>	+	\$ _____	=	\$ <u>9,892.00</u>
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Total current monthly income

Part 2: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/Earle Stanley Greer

Signature of Debtor 1

X

Signature of Debtor 2

Date 08/02/2019
 MM / DD / YYYY

Date _____
 MM / DD / YYYY

**Attachment
Debtor: Earle Stanley Greer Case No: 18-18146elf**

Attachment Line 6. Gross receipts

21,000.00

Attachment Line 6. Ordinary and necessary operating expenses

11,108.00